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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| Codifical Continues of Change           |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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2009 FEB 24 PH 1: 26

C. LEWIS
FEB 2 5 2009
EXAMINER

## **COVER LETTER**

| TO: Registration Section Division of Corporations  |
|--|
| SUBJECT: Bookkeeping Plus Services, The (Name of Resulting Florida Limited Company)  |
| The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.  |
| Please return all correspondence concerning this matter to:  |
| Fay Martel (Contact Person)  Bookkeeping Plus Services, Inc. (Firm/Company)  1000. Mc Nab Road, Ste 108  (Address)  Pampan Beach, FL 33069 (City, State and Zip Code)  |
| For further information concerning this matter, please call:   |
| (Name of Contact Person) at (954) 673-3725 (Area Code and Daytime Telephone Number)  |
| Enclosed is a check for the following amount:  |
| \$\frac{1}{2}\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\frac{1}{2}\$155.00 Filing Fees and Certificate of Status \$\frac{1}{2}\$185.00 Filing Fees and Certified Copy (Certified Copy, and Certificate of Status |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314    |

FILED

### **Certificate of Conversion**

For

## "Other Business Entity"

Into

#### Florida Limited Liability Company

2009 FEB 24 PH 1: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this

Certificate of Conversion is:

| bookiceoina lius services, Inc.  |
|--|
| (Enter Name of Other Business Entity)  |
| 2. The "Other Business Entity" is a Corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)  |
| first organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)  |
| on 3/10/205 (Enter date "Other Business Entity" was first organized, formed or incorporated)   |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:   |
| 4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Bookkeeping Plus Services, LLC  (Enter Name of Florida Limited Liability Company)   |
| 5. If not effective on the date of filing, enter the effective date:  (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.) |

| , · · · · ·   |  |
|---|--|
| Signed this 13 day of teleruary   | _ 20_ <u>O                                   </u>              |
| Signature of Member or Authorized Representa  |  |
| Signature of Member or Authorized Representative Printed Name: Fay Martel   | : tay Montil<br>Title: Prosident                               |
| Signature(s) on behalf of Other Business Entity:  |  |
| Signature: Lou Martel Printed Name: Fay Martel  | Title:   |
| Signature:Printed Name:   |  |
| Signature:Printed Name:   | _ Title:   |
| Signature:Printed Name:   | Title:   |
| Signature:Printed Name:   | _ Title:   |
| Signature:Printed Name:   | _ Title:   |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. |  |
| If Florida General Partnership or Limited Liabilit<br>Signature of one General Partner.                             | y Partnership:   |
| If Florida Limited Partnership or Limited Liabilit<br>Signatures of <u>ALL</u> General Partners.                    | y Limited Partnership:   |
| All others: Signature of an authorized person.  | FEB 24<br>CRETAR<br>CAHASS                                     |
| Fees:   | May A M  |
| Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:        | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) |

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

| <u>Bookkeepina Plus Seru</u>   | ices, LLC  |
|--|--|
| (Must end with the words "Limited Liability Company," the "LLC.")  | abbreviation "L.L.C.," or the designation              |
| ARTICLE II - Address: The mailing address and street address of the  | principal office of the Limited                        |
| Liability Company is:  |  |
| Principal Office Address:  | Mailing Address:                                       |
| Fre. 108<br>Pompens Beach, FL 33069  | 1000 W. McNab Rd<br>Ste. 108<br>Ponpan Beach, FC 33069 |
| ARTICLE III - Registered Agent, Register Signature: (The Limited Liability Company cannot serve as its own Reindividual or another business entity with an active Florida registration.) | gistered Agent. You must designate an                  |
| The name and the Florida street address of th  | e registered agent are:                                |
| Fay Marti  | ASSET 22 FT  |
| 1000 W. Mch  | mes Rd. Ste 108 mg = =                                 |
| Florida street address (P.   | O. Box NOT acceptable)                                 |
| Poripano Bea<br>City, Si   | NFL 33069  |
| City, St   | ate, and Zip   |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REOUIRED)

(CONTINUED)
Page 1 of 2

| ARTICLE IV- Manager(s  | or Managing Member(s):  100 or Managing Member is as follows:  100 or Managing Member(s):  100 or Managing Me |
|--|--|
| The name and address of ea   | ich Manager or Managing Member is as follows: \$7.68.24  |
| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Men  | SEE BURN   |
| MGR  | Fay Martel<br>1000 W- McNab Rd. #108<br>Pompano Beach, FL 33069  |
|  |  |
|  |  |
|  |  |
|  | (Use attachment if necessary)  |
|  | er than the date of filing:  |
| effective date: 1) cannot be perment is filed by the Florida Effective date listed in the at   | (OPTIONAL) prior to nor more than 90 days after the date this Department of State; <u>AND</u> 2) must be the same as tached Certificate of Conversion, if an effective   |
| effective date: 1) cannot be ment is filed by the Florida Effective date listed in the at is listed therein.)  REQUIRED SIGNATURI  | prior to nor more than 90 days after the date this Department of State; <u>AND</u> 2) must be the same as tached Certificate of Conversion, if an effective  |
| effective date: 1) cannot be ment is filed by the Florida Effective date listed in the at is listed therein.)  REQUIRED SIGNATURI  | prior to nor more than 90 days after the date this Department of State; <u>AND</u> 2) must be the same as tached Certificate of Conversion, if an effective  |
| effective date: 1) cannot be ment is filed by the Florida Effective date listed in the at is listed therein.)  REQUIRED SIGNATURI  | prior to nor more than 90 days after the date this Department of State; <u>AND</u> 2) must be the same as tached Certificate of Conversion, if an effective  |
| ment is filed by the Florida I offective date listed in the at is listed therein.)  REQUIRED SIGNATURE  Signature of a member  (In accordance with second this document constitutions) | prior to nor more than 90 days after the date this Department of State; <u>AND</u> 2) must be the same as tached Certificate of Conversion, if an effective  |

\$ 5.00 Certificate of Status (Optional)
Page 2 of 2

of Registered Agent
\$ 30.00 Certified Copy (Optional)